## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correcte maintenance fee notifical	ea below or alrected our	or transmitting g the Patent, ad erwise in Block	the ISSU vance or 1, by (a	E FEE and PUBLICATION ders and notification of means are corresponding a new corresponding to the property of	ondence address;	anwor	(b) moleaning a sepa	rate FEE ADDRES	33 101
CURRENT CORRESPONDI	paper	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.							
23598	7590 10/06								
BOYLE FREDRICKSON S.C. 840 North Plankinton Avenue MILWAUKEE, WI 53203					aby cartify that thi	e Heale)	of Mailing or Trans Transmittal is being cient postage for firs SSUE FEE address ) 273-2885, on the description of the second of	denocited with the	United velope csimile
				Mi	Michael J. McGovern			(Depositor's name)	
				}	iling Electronically			(Signature)	
		December 3, 2008				(Date)			
APPLICATION NO.	N NO. FILING DATE						NEY DOCKET NO.	CONFIRMATION NO.	
10/575,151 11/30/2006			***************************************	Dietmar Schmetzer		720734.00006		7276	
TITLE OF INVENTION	I: STACKER			,,,,,					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE		PUBLICATION FEE DUE	PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	МО	\$1510		\$300	\$0		\$1810	01/06/2009	)
EXAMINER ART UNIT		T	CLASS-SUBCLASS						
BIDWELL, JAMES R 3651				198-411000					
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Optima Filling And Packaging Machines GmbH  Schwabisch Hall, Germany									
Please check the approp	riate assignee category o	r categories (will	l not be p	rinted on the patent):	Individual 🔼 C	orporati	on or other private gr	oup entity Gove	emment
4a. The following fee(s) are submitted:  Issue Fee  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies3				<ul> <li>4b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)</li> <li>☐ A check is enclosed.</li> <li>☐ Payment by credit card. Form PTO-2038 is attached.</li> <li>☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-1170 (enclose an extra copy of this form).</li> </ul>					
a. Applicant clain	atus (from status indicate ns SMALL ENTITY state and Publication Fee (if rec records of the United St	us. See 37 CFR	1.27. ce accepte Trademar	b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  d from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in conice.					
Authorized Signature				Date December 3, 2008					
Typed or printed nar		*****************************		Registration No. 28,326  In is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process)					
This collection of inform	mation is required by 37	CFR 1.311. The	informat	ion is required to obtain or	retain a benefit by	the pub	lic which is to file (a	nd by the USPTO to	process)

Inis collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.